

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 402702	RECEIPT DATE:	10 / 06 / 99
IA NUMBER:	PCT/ FR99 / 00305	IA FILING DATE:	02 / 11 / 99
FAMILY NAME:	CAZIN	DELAY WAIVED (Y/N):	Y
GIVEN NAME:	DOMINIQUE	DEMAND RECEIVED (Y/N):	N
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	02 / 11 / 98
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	FR9801747	COUNTRY:	FRX
CORRESPONDENCE NAME/ADDRESS:	CUSTOMER NUMBER:	TELEPHONE	2128481000
		FAX	2126882449
NAME:	GRAHAM & JAMES		
STREET:	885 THIRD AVENUE		
CITY:	NEW YORK		
STATE/COUNTRY:	NY	ZIP:	10022
EMAIL:			
APPLICATION TITLES:			
FAX MACHINE FOR COMPUTER NETWORK			

TAB TO LAST POSITION.PUSH SEND

SERIAL NUMBER 09/402,702	FILING DATE 10/06/99	CLASS 358	GROUP ART UNIT 2722	ATTORNEY DOCKET NO. 511/96506.01
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APPLICANT

DOMINIQUE CAZIN, SURESNES, FRANCE.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*  
VERIFIED

\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*  
VERIFIED THIS APPLN IS A 371 OF PCT/FR99/00305 02/11/99

\*\*FOREIGN APPLICATIONS\*\*\*\*\*  
VERIFIED FRANCE 98 01747

02/13/98

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 12/13/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY FRX	SHEETS DRAWING 1	TOTAL CLAIMS 7	INDEPENDENT CLAIMS 1
Verified and Acknowledged Examiner's Initials _____ Initials _____					

ADDRESS	GRAHAM & JAMES 885 THIRD AVENUE NEW YORK NY 10022  PHONE: (212)848-1000
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TITLE	FAX MACHINE FOR A DATA COMMUNICATION NETWORK SUCH AS INTERNET
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FILING FEE RECEIVED  \$840	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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